SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:						PAGE	= 3	34	OF	60		
(c	he	ck only	or	ne)								
	X	11a		11b		11c		12				
		13		14		15		16		17		

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Sheet Metal And Air Conditioning Contractors Political Action Committee Full Name (Last, First, Middle Initial) Linda M. Jennings Date of Receipt Mailing Address 5308 Tufts Street 10 2011 21 City State Zip Code Transaction ID: 19462141 CA La Mesa 91942-1702 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation SMACNA Of San Diego **Executive Director** Receipt For: Aggregate Year-to-Date ▼ Primary General 526.25 Other (specify) Full Name (Last, First, Middle Initial) B. Lee C. Dietz Date of Receipt Mailing Address 10 Marianne Dr Ste 102 10 21 2011 City State Zip Code Transaction ID: 19462142 PA York 17406-6069 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Specialty Fabricators, Inc. Contractor Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lois A. Streimer Date of Receipt Mailing Address 740 N Knott St 10 21 2011 City Zip Code State Transaction ID: 19462145 OR Portland 97227-1613 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	·····			7	I	Ī	7	I	60	00.00)	
TOTAL This Period (last page this line number	only)		Ξ	7	Ξ	_	7	Ξ	_		_	

250.00

С

Occupation
Contractor Spouse

Aggregate Year-to-Date ▼

250.00

FEC ID number of contributing

Streimer Sheet Metal Works, Inc.

Other (specify)

General

federal political committee.

Name of Employer

Primary

Receipt For: